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DECLARATION AND POWER OF ATTORNEY AND APPOINTMENT OF DOMESTIC REPRESENTATIVE

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

MAGNETIC RESONANCE IMAGING METHOD (K-T BLAST AND K-T SENSE MAGNETIC RESONANCE IMAGING)

the specification	on of which		
(Check one)			
<u> X</u>	is attached hereto. was filed on Application Serial and was amended (if applicable)	<u>[une 24, 2004</u> No. <u>PCT/CH2004/000387</u>	as
-	rification, including	l and understand the content the claims, as amended by a	
information k	nown to be material	e to the U.S. Patent and Trad to the patentability of this a Federal Regulations, Sections	oplication in
119(a)-(d) or (f certificate or p application wh America, listed patent, or inve), or 356(b) of any for lant breeders rights nich designated at le d below and have als entor's certificate, or application having a	nefits under Title 35, United Soreign application(s) for pate certificate(s), or 356(a) of any ast one country other than the so identified below any foreight plant breeder's rights certifications date before that of the	nt or inventor's y PCT international ne United States of gn application for cate, or any PCT
Prior Foreign	Application(s)		Priority <u>Claimed</u>
03015012.2	EP	02/July/2003	<u>X</u>
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
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CH2004/00038	37 <u>PCT</u>		004	<u>X</u>	
(Number)	(Country)	(Day/Month	n/Year Filed)	Yes	No
I hereby claim	the benefit	under Title 35, United	States Code, §120 of any	y United	d
	` '		the subject matter of each		
			prior United States appl 35, United States Code,		in the
acknowledge t	he duty to d	lisclose material inform	mation as defined in Tit	le 37, Co	
•		• •	occurred between the fil ternational filing date of	_	e ot
application:			<i>g</i>		
(Application S	erial No.)	(Filing Date)	(Status)		
			(Patented abandon	-	ng,
			ubarteon	cuj	
I hereby claim	the benefit:	inder 35 IIS C 8110/a	e) of any United States P	Provisio	aal
Application(s)			e) of any Officed States I	10015101	lai
				Prior	-
				Clair	nea
(Number)		(Day/Month/Year F	iled)	Yes	No

POWER OF ATTORNEY

I hereby appoint all registered patent attorneys associated with Customer Number 35301 assigned to the firm of McCormick, Paulding & Huber LLP, CityPlace II, 185 Asylum Street, Hartford, Connecticut 06103-3402, telephone (860) 549-5290, as my attorneys to prosecute this application, to make alterations and amendments therein, to receive the patent and all correspondence relating to this application, and to transact all business in the U. S. Patent and Trademark Office connected therewith, and the said attorneys are hereby given full power of substitution and revocation.

APPOINTMENT OF DOMESTIC REPRESENTATIVE

The above-identified attorneys, also known as McCORMICK, PAULDING & HUBER LLP, whose postal address is CityPlace II, 185 Asylum Street, Hartford, Connecticut 06103-3402, United States of America, are hereby designated applicant's

representative upon whom notices or process in proceedings affecting the patent may be served. Said firm shall take instructions from my foreign patent agents in all matters affecting this application and the patent.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false

statements may jeopardize the validity of the application or any patent issued thereon.

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